Increasing Vaccine Coverage Rates for Influenza Healthy People (HP) 2010 Leading Health Indicator 14-29

PHN contribution to (county/city) Public Health Improvement Plan for 2002
Assessment:
In (county/city), data from shows that the vaccine coverage rate for influenza among institutionalized adults in long term care facilities in (county/city) is% and among staff in the same facilities the coverage rate is% for year(s).
Vaccine coverage rates for the clients and staff of long term care facilities in (county/city) differ from or are similar to the state wide profile in the following ways: *Insert county/city/state comparison data here.*
Describe the qualitative and quantitative factors that influence the extent to which the clients and staff of long term care facilities in (county/city) receive influenza vaccination. Aim to answer the question, "What are the factors that contribute to clients and staff of long term care facilities not getting vaccinated?"
Diagnosis:
NOTE: If the health department can promise improvement in vaccine coverage rates for all the clients and staff of long term care facilities in (county/city), then so state here. If there are no resources available to promise improvement in all, then under this heading describe in what way vaccine coverage rates for the clients and staff of certain long term care facilities in (county/city) are worse. For instance, coverage rates are% overall but% for long term care facilities with primarily female staff and clients (therefore, the focus for improvement efforts is long term care facilities with primarily female staff and clients).
The rationale for focusing on a certain subgroup of long-term care facilities should be based on available resources.
Identifying Outcomes:
Outcome Objective 1
By (date), the proportion of clients in (#) long term care facilities in (county/city) who are vaccinated annually against influenza will increase% (county/city baseline of% foryear, to%). (HP 2010 baseline of 59% in 1997; HP 2010 target of 90%).

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Outcome Objective 2
By <i>(date)</i> , the proportion of staff in <i>(#)</i> long term care facilities in (county/city) who are vaccinated annually against influenza will increase% (SPA baseline of% foryear, to%). (No HP 2010 baseline or target)
Planning and Action:
Intermediate Objectives
[DEFINITION: Intermediate objectives link the outcome objectives to the process objectives. They describe the changes that will occur that ultimately result in or produce the desired outcome. They are precursors to attaining the outcome. Intermediate objectives have shorter time frames and clearly reflect what can be accomplished and measured within the time period of the program plan. Intermediate objectives assess measures, which have a high probability of reducing a health problem or increasing resiliency/capacity. These objectives measure the impact of specific interventions designed to achieve the outcome. Intermediate objectives measure changes in organizations, laws, policies, and power structures at the systems level, changes in community norms, attitudes, awareness, beliefs, practices, and behavior at the community level, and knowledge, attitude, beliefs, values, skills, circumstances, behaviors, and practices at the individual/family level.]
The following are examples of possible/suggested related intermediate objectives for influenza vaccine coverage based on best practices from "Recommendations of the Advisory Committee on Immunization Practices" (ACIP), CDC April 20, 2001 and "Vaccine Preventable Diseases: Improving Vaccination Coverage in Children, Adolescents and Adults", a report on recommendations from the Task Force on Community Preventive Services, CDC, June 18, 1999.
 By (date), there will be a% increase in the demand for influenza vaccine among the staff and clients in (#) long term care facilities in SPA, as evidenced by
2. By (date), the clients and staff of (#) long term care facilities in (county/city) will have a% increase in access to influenza vaccination, as evidenced by

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Using one of the above examples, the following is a demonstration of how the process extends from the Intermediate Objectives to the Process Objectives which describe the action/intervention.

EXAMPLE:

Intermediate Objective 1:
By (date), there will be a% increase in the demand for influenza vaccine among the staff and clients in (#) long term care facilities in (county/city), as evidenced by
Process Objective 1:
[DEFINITION: Process objectives are the methods of the intervention. They detail the specific tasks that will be carried out within a specified time frame. Process objectives describes the input; the means by which the intervention or strategy will be implemented. They include inputs, participation, and reactions.]
By (date), the PHNs will develop a flu vaccination reminder/recall system in conjunction with each targeted long-term care facility in (county/city) to ensure timely vaccination of staff and clients. (Minnesota PHN Interventions: Collaboration, Outreach; System and/or Community, Primary prevention)
Process Objective 2: By (date), PHNs will
Process Objective 3: By (date), PHNs will
And so on
Under the direction of the local health department nursing director, other relevant

Under the direction of the local health department nursing director, other relevant Intermediate Objectives should be developed that address the Outcome Objectives as well as specific Process Objectives that address each Intermediate Objective.

NOTE: Ultimately, the Outcome Objective of increasing vaccine coverage for influenza among the population will *only be achieved if other disciplines and the community* contribute to identifying Intermediate and Process Objectives.

Evaluation:

Each Process Objective and Intermediate Objective should have a mechanism to evaluate whether or not the objective was accomplished. This includes a mechanism to track progress toward achieving the Outcome Objective at regular intervals.